



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
(Attorney Docket No.: 109779-134)

Applicant(s): Newnam, et al.  
Serial No.: 09/931,590 Examiner: Alam, Uzma  
Filed: August 16, 2001 Group Art Unit: 2157  
For: A SYSTEM AND METHOD FOR RECORDING AND PLAYING  
BACK INTERACTIVE CONTENT DURING A BROADCAST EVENT

**CERTIFICATE UNDER 37 C.F.R. 1.8(a)**

I hereby certify that this correspondence is being deposited as first class mail in an envelope addressed to  
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date set forth below.

2/17/06  
Date

Jody Begley

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**NOTIFICATION OF LOSS OF ENTITLEMENT TO  
SMALL ENTITY STATUS UNDER 37 C.F.R. § 1.27(g)(2)**

Applicants hereby provide notice that this application is no longer entitled to small entity status. Pursuant to Rule 27(g)(2), because small entity status was properly established at the time of filing, it is believed that small entity fees can continue to be paid until payment of the issue fee.

It is believed that no fee is required in connection with this matter, but if any fee is required, please charge our deposit account no. 08-0219.

Respectfully submitted,

Date: 2-17-06

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RCE 2/17/06

PTO/SB/17 (12-04v2)

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<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	09/931590-Conf. #2417
		Filing Date	August 16, 2001
		First Named Inventor	Scott G. NEWNAM
		Examiner Name	U. Alam
		Art Unit	2157
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	0109779.00134US1
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b>	905.00

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>08-0219</u> Deposit Account Name: <u>Wilmer Cutler Pickering Hale and Dorr LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
						<b>Small Entity</b>	
<b>Fee Description</b>						<b>Fee (\$)</b>	<b>Fee (\$)</b>
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<b>Total Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		
_____ - 20 = _____		x _____	= _____		<b>Fee (\$)</b> <b>Fee Paid (\$)</b>		
<b>Indep. Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
_____ - 3 = _____		x _____	= _____				
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		
_____ - 100 = _____	/50	_____ (round up to a whole number) x _____		= _____			
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 2253 Extension for response within third month						510.00	
2801 Request for continued examination (RCE) (see 37 ...)						395.00	

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	37,122
Name (Print/Type)	Michael A. Diener	Telephone	(617) 526-6000
		Date	February 17, 2006

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Dated: February 17, 2006	Signature:  (Jody Begley)